Phase 1	Fund - §54.1009 Annual Reporting lection Form	FCC Form Approved by OMB OMB 3060-1185 Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	498023
<015>	Study Area Name	Communet Wireless, LLC
<020>	Program Year	2017
<030>	Contact Name: Person USAC should contact with questions about this data	Rohan Ranaraja
<035>	Contact Telephone Number: Number of the person identified in data line <030>	5014461249 ext.
<039>	Contact Email: Email of the person identified in data line <030>	rranarajaiatní.com
<040>		
	Has the information required pursuant to §54.1009 <041> Attach a description of the documents fill <042> Cite the Study Area Code (SAC) for the Fo	led with the Form 481 reporting <041>

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

<015> Stu <020> Pro <030> Co <035> Co <039> Co <110> FCO <111> Fili <112> Wi <113> Str <114> Cit <115> Sta	inning Bidder Carrier Name reet Address (or PO Box) ty Little Rot ate p-Code dephone Number x Number	ine <030> rranarala@atni.com ireless, LLC ireless, LLC nology Drive, Suite 202 ck
<015> Stu <020> Pro <030> Co <035> Co <039> Co <110> FCO <111> Fili <112> Wi <113> Str <114> Cit <115> Sta	and y Area Name orgam Year ontact Name - Person USAC should contact regarding this data ontact Telephone Number - Number of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Email Address - Email Address of person identified in data list ontact Telephone Number 7116403 7116403 700mrnet W Commet W Little Rod ontact Political School Commet W Little Rod	Rohan Ranaraja ne <030> 5014481249 ext. ine <030> rranaraja@atni.com ireless, LLC ireless, LLC nology Drive, Suite 202 ck
<020> Processor <030> Co <035> Co <039> Co Reporting Carriage <110> FC <111> Filitable <112> With <113> Str <114> Cit <115> <15 State <15 <15 <16 <17 <17 <17 <18 <18 <19 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <11 <12 <12 <13 <14 <15 <16 <17 <17 <17 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18 <18	ogram Year Intact Name - Person USAC should contact regarding this data Intact Telephone Number - Number of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Email Address - Email Address of person identified in data list Intact Telephone Number 7116403	Rohan Ranaraja ne <030> 5014481249 ext. ine <030> rranaraja@atni.com ireless, LLC ireless, LLC nology Drive, Suite 202 ck
<035> Co <039> Co Reporting Carr <110> FC <111> Fili <112> Wi <113> Str <114> Cit <115> Sta	Intact Telephone Number - Number of person identified in data list intact Email Address - Email Address of person identified in data list intact Email Address - Email Address of person identified in data list intact Email Address - Email Address of person identified in data list intact Email Address - Email Address of person identified in data list intact 116403 116	ne <030> 5014481249 ext. ine <030> rranaraja@atni.com ireless, LLC ireless, LLC nology Drive, Suite 202 ck
<039> Co Reporting Carr <110> FCc <111> Fili <112> Wi <113> Str <114> Cit <115> Sta	inter / Mobility Fund Phase 1 Winning Bidder C Registration Number C Registration Number Comment W Little Roy ate D-Code Code Comment W Comment W	ine <030> rranarala@atni.com ireless, LLC ireless, LLC nology Drive, Suite 202 ck
Reporting Carr	rrier / Mobility Fund Phase 1 Winning Bidder C Registration Number ing Carrier Name commet W	ireless, LLC ireless, LLC nology Drive, Suite 202 ck
<110> FCC <111> Fili <112> Wi <113> Str <114> Cit <115> Sta	C Registration Number C Registration Number ing Carrier Name Commet W Commet W Commet W Commet W Little Roll ate p-Code lephone Number x Number	ireless, INC nology Drive, Suite 202 ck
<111> Fili <112> Wi <113> Str <114> Cit <115> Sta	ing Carrier Name Commet W inning Bidder Carrier Name reet Address (or PO Box) ty Little Roy ate p-Code ty Little Roy Little Roy AR 5014461249	ireless, INC nology Drive, Suite 202 ck
<111> Fili <112> Wi <113> Str <114> Cit <115> Sta	ing Carrier Name Commet W inning Bidder Carrier Name reet Address (or PO Box) ty Little Roy ate p-Code ty Little Roy Little Roy AR 5014461249	ireless, INC nology Drive, Suite 202 ck
<112> Wi <113> Str <114> Cit <115> Sta	inning Bidder Carrier Name reet Address (or PO Box) ty Little Ros ate p-Code dephone Number sy Number	ireless, INC nology Drive, Suite 202 ck
<113> Str <114> Cit <115> Sta	reet Address (or PO Box) ty Little Rot ate AR p-Code tlephone Number x Number	nclogy Drive, Suite 202 ck
<114> Cit <115> Sta	ty	ck
<115> Sta	ate AR p-Code 72223 elephone Number 5014481241	
	p-Code 72223 elephone Number 5014481241	9 ext.
	elephone Number 5014461249	9 ext.
	Number -	9 ext.
	x Number	
	501448115	1
<119> Em	nail Address rranaraja	+atni.com
<120> Na	same as above, indicate in this box ame (First, MI, Last, Suffix) Echan Rana	ivaja ireles€, ILC
<122> Str	reet Address (or PO Box)	rology Grive. Suite 202
<123> Cit	ty Little Roo	:k
<124> Sta	ate AR.	
<125> Zip	p-Code 72223	
<126> Te	elephone Number 5014481249	9 ext.
<127> Fa	x Number 5014481151	
<128> En	mail Address rranaraja	
	gent Information no agent, indicate in this box	
	ame (First, MI, Last, Suffix)	
	ompany	- Historie Western
	reet Address (or PO Box)	
<133> Cit	-	
<134> St.		
<135> Zij	p-Code	
<136> Te	elephone Number	
<137> Fa	ax Number	
<138> En	mail Address	

(060) Co	verage and Performance Report		FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code	498023	
<015>	Study Area Name	Commnet Wireless, LLC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Rohan Ranaraja	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5014481249 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	rranaraja@atni.com	
<140>	Coverage and Performance Report Year 01/2016 - 12/2016		

Coverage and Performace attachments

SAC49823_CPRd_Voice_Coverage_NM_09232016.zip, SAC49823_CPRd_Broadband_Coverage_NM_09232016.zip

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<c1></c1>	<c2></c2>	<c3></c3>	<d></d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance dat is uploaded (Yes/no)
				See attach	ed works	heet			

Percentage of Total
Population Reached by
Service
Percentage of Total
Road Miles covered
by Service

(070) Urban Rate Comparability Certification Co.	npliance	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 4 of 8
<010> Study Area Code	498023	

<010>	Study Area Code	498023
<015>	Study Area Name	Commnet Wireless, LSC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Rohan Ranazaja
<035>	Contact Telephone Number - Number of person identified in data line <030>	5014481249 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rranaraja3atni.cem

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4) I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate. Communet Wireless, LLC Name of Reporting Carrier: CERTIF AL CNAINS Date 28 14 2017 Signature of Authorized Officer: Roman Panaraja Printed name of Authorized Officer: Director Regulatory Compliance Title or position of Authorized Officer: 8014480249 ext. Telephone number of Authorized Officer: Filing Due Date for this form: \$77/\$1/2017 498023 Study Area Code of Reporting Carrier: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting
arrier. I also certify that I am an officer or employee of the re uthorized agent; and, to the best of my knowledge, the repor	porting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the ts and data provided to the authorized agent is accurate.
lame of Authorized Agent:	
lame of Reporting Carrier:	
ignature of Authorized Officer or Employee:	Date:
rinted name of Authorized Officer or Employee:	
itle or position of Authorized Officer or Employee:	
elephone number of Authorized Officer or Employee:	
tudy Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorize	to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier
, as agent for the reporting carrier, certify that I am authoriz data provided by the reporting carrier; and, to the best of m	to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on
lame of Reporting Carrier:	
lame of Authorized Agent Firm:	
ignature of Authorized Agent or Employee of Agent;	Date:
lame of Authorized Agent Employee:	
Itle or position of Authorized Agent or Employee of Agent	
elephone number of Authorized Agent or Employee of Agent	
tudy Area Code of Reporting Carrier:	Filing Due Date for this form:

(080) Triba	l Lands Reporting			FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code			
<015>	Study Area Code Study Area Name		498023 Commet Wireless, LLC	
<020>	Program Year		2017	
<030>	Contact Name - Person USAC should contact rega	rding this data		
<035>	Contact Telephone Number - Number of person ic		Rohan Ranaraja	
<039>	Contact Email Address - Email Address of person i		5014481249 ext.	
10332	Contact Email Address Email Address of person i	dentined in data line 40302	rranaraia@atri.com	
<142>	State	NV.		
1422	State	No.	-1	
		Taos		
<143>	County			
.13.	County			
		Picirus Puerlo		
-1.44-	Tribal Land(a) an orbital FTC Common			
<144>	Tribal Land(s) on which ETC Serves			
		Enable of Branch m	ribal Engagement Letter.pdf	
		Fueblo of Pictile 17	irai migagement hetter put	
	Car decrees a series of the series			
<145>	Tribal Government Engagement Obligation			11
		Name of Attached Docum	ent (.pdf)	

If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes;

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	Yes
<147>	Feasibility and sustainability planning;	Yes
<148>	Marketing services in a culturally sensitive manner;	Yes
<149>	Compliance with Rights of way processes	Yes
<150>	Compliance with Land Use permitting requirements	Yes
<151>	Compliance with Facilities Siting rules	Yes
<152>	Compliance with Environmental Review processes	Yes
<153>	Compliance with Cultural Preservation review processes	Yes
<154>	Compliance with Tribal Business and Licensing requirements.	Yes

(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	498023
<015>	Study Area Name	Communcet Wireless, LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Rohan Ranaraja
<035>	Contact Telephone Number - Number of person identified in data line	:<030> 5014481249 ext.
<039>	Contact Email Address - Email Address of person identified in data line	2 <030> rransraja@atni.com
<200>	Date Authorized to Receive Support	10/16/2014
<201>	Targeted Completion Date	10/11/2016
<202>	Total Mobility Fund Support Awarded	76794
<203>	Total Mobility Fund Support Disbursed	62123
<210> <211>	Actual Completion Date Project Status Description (attached)	10/18/2016 498323 Project Status.pdf
	Please check these boxes below to confirm that the attached PDF, on 211, contains a project status pursuant to §54.1005(b)(2)(v). The information in the submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	V
<214>	Status of Network Deployment - Deployment	
<215>	Status of Network Deployment - Maintenance	
<216>	Project Budget Status	
<217>	Project Plan Status	V
<218>	Network will Support 3G/4G Mobile Service ?	

101) Cert	ification - Reporting Carrier		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 7 of 8
<010>	Study Area Code	498023	
<015>	Study Area Name	Communet Wireless, LLC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Rohan Ramaraja	

5014481249 ext.

rranaraja@atni.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

<035> Contact Telephone Number - Number of person identified in data line <030>

Contact Email Address - Email Address of person identified in data line <030>

<039>

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.					
Name of Reporting Carrier: Communet Wireless, LLC					
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/14/2217				
Printed name of Authorized Officer: Roban Ranaraja					
Title or position of Authorized Officer:	Compliance				
Telephone number of Authorized Officer: 5014481249 ext.					
Study Area Code of Reporting Carrier: 498023	Filing Due Date for this form: 27/03/2017				

26/09/2017 Page 7

102) Cer	tification - Agent / Carrier		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 8 of 8
<010>	Study Area Code	498023	
<015>	Study Area Name	Commnet Wireless, LLC	

2017

Rohan Ranaraja

5014481249 ext.

rranaraja@atni.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030>

<030> Contact Name - Person USAC should contact regarding this data

l certify that (Name of Agent)				
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date:			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			

TO BE COMPLETED BY THE AUTHORIZED AGENT:

<020> Program Year

<035>

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier					
l, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.					
Name of Reporting Carrier:					
Name of Authorized Agent Firm:					
Signature of Authorized Agent or Employee of Agent:		Date:			
Name of Authorized Agent Employee:					
Title or position of Authorized Agent or Employee of Agen	nt .				
Telephone number of Authorized Agent or Employee of A	gent:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:				

Confidential Attachments Withheld From Public Inspection